

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R / 11-09)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management Office of Pollution Prevention and Technical Assistance

> 100 North Senate Avenue MC 64-00, Room IGCS W041 Indianapolis, IN 46204-2251 Telephone: (800) 988-7901

FAX: (317) 233-5627 E-mail: esp@idem.IN.gov www.IN.gov/idem/4132.htm

INSTRUCTIONS: Please use this annual report form if you are a member of the Indiana Environmental Stewardship Program (ESP). Your annual performance report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, FAX, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP program manager at 1-800-988-7901.

The Indiana ESP annual performance report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. Your annual performance report should cover the previous twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit this annual performance report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A FACILITY INFORMATION
Name of facility
Eaton Corporation
Name of parent company (If applicable)
Street address (number and street)
201 Brandon Street
City / State / ZIP code
Auburn, IN 46706
Facility/Company Web site
(JU) W. eston. com
CONTACT INFORMATION
Contact name (Mr) / Mrs. / Ms. / Dr.)
Dreut Jewen
Title FUS Manager.
CHO Water John
Telephone number 260 570 - 7918
FAX number
E-mail address
brentjensen Q. salon oco M
Mailing address (if different from facility address)
City / State / ZIP Code
REPORTING PERIOD
Reporting period dates (month, day, year)
Reporting period dates (month, day, year)
1a. Is this the third Annual Performance Report of your membership term?
Yes—If yes, answer question 1b.
No—If no, skip to the "Change in Information" section of this report.
1b. Do you wish to renew your Indiana Environmental Stewardship Program membership?
Yes—If yes, please complete all sections of this annual report.
No—If no, please complete all sections of this annual report except for Section D.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any
changes or additions to your facility's list of products or activities?
STATE OF THE STATE
☐ Yes ☐ No
If yes, please describe them:
., , , , , , , , , , , , , , , , , , ,

	SECTION B ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT						
IDE	y do we need this information? M needs information on the perforironmental Management System	ormance and assessment of you		Please summarize you Attach additional docum	What do you need to do? ir facility's EMS assessments. ents if more space is needed.		
1.	Is your facility currently register	ed to a recognized third-party E	EMS standard?				
	Yes—If yes, when was an E conducted by an independent t		last	hen was an internal or corporate	EMS audit last conducted at		
	Type (e.g., ISO 14001 cer	tification) ISO 1400	Scope	e of the audit			
	Scope of the audit Full	I Wangement Ass	essuent Month	n / year			
	Month / year	A					
2.	and the second s			Do not include inspections or si	te visits by regulatory		
		ee 2009 - il	uterul Assessi	mend,			
	Month(s) / Year(s)	s) (e.g., facility staff, corporate,	third party)				
3.	(Optional) Please describe any						
4.				non-conformance identified duri	ng your audits and other		
	No—If no, please explain your No such instances identified. No—If no, please explain your No such instances identified. No—If no, please explain your No such instances identified. Plans to correct these instances. No—If no, please explain your No such instances identified. Plans to correct these instances. No—If no, please explain your No such instances identified. Plans to correct these instances.						
5.	effective? What changes, if an	y, have been made to your faci	lity's emergency or contingency	icable emergency and contingency by plans?			
6.	When was the last Senior Man Month / Year \ Who headed the review?	agement review of your EMS co 2009 Name and title Booth		Meurger.			
7,	When did your facility last cond Month/Year	uct a systematic identification of 2009 - EHS Aud 1	or review of your environmenta	al aspects?			
8.	Performance Initiative in Section	rrative summary of progress manning of C. You may limit the summan Attach additional sheets as nec	ry to environmental aspects th	d targets <u>other than those report</u> nat are <i>significant</i> and towards wh	ed as an Environmental nich <i>progress</i> has been made		
En	vironmental aspect	Progress made	e this year (e.g., quantitative o	r qualitative improvements, activi	ities conducted)		
Wh Fa	SECTION C ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS Why do we need this information? Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period. ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS What do you need to do? Summarize your facility's progress on achieving the initiative you identified in the application or last year's Annual Performance Report.						
	tegory Total Water CINSU	Baseline Quantity	Future Goal Quantity	Current Quantity	Cost Savings		
_	licator Gollens und	7000	2009	2009	166/ 1		
-	tual quantity (per year)	2008	19.607.485	72466.000	10% deenase		
	rmalized quantity (per year)	137515	1,000,985	1235.05	consumption.		
	sis for your normalizing factor g., gallons of paint produced)		Manhours	> 1 = 1	Cast sovings		
М	easurement unit (e.g., pounds)	Gollone cons	une		1 6697		
	efly describe how you achieved in ease list any state, U.S. EPA, or o	mprovements for this environme	ental initiative or, if relevant, an				

ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION D

ENVIRONMENTAL IMPROVEMENT INITIATIVES

What do you need to do?

Why do we need this information?

	ilities need to show they are committed to Identify your facility's next environmental improvement initiative. Refer to the Environmental Performance Table and answer the following questions.
1a.	What category have you selected from the Environmental Performance Table?
1b.	What indicator have you selected from the Environmental Performance Table? Total (non-transportation) everyy we
1c.	All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?
	AII
	Specific
	If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). Natural gos consumption will be reduced by 10% with the installation of two new our rotation will be described on the provided by 10% with the installation of two new our rotation with a decomposition of older our make up with.
1d.	What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)?
2.	Does this initiative address a significant aspect in your EMS? Yes
	No—please explain why you believe this indicator should be included as an environmental improvement initiative:
3.	Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?
	Yes—please explain how your initiative exceeds regulatory requirements:
tui	op! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and in to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below.
4a.	What units are you using to quantify this indicator?
4b.	List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year. Baseline quantity Year
	Future year quantity (not including production) Year
5.	Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal?
	Normalized goal (i.e., indexed to level of business in baseline year)
	Absolute goal (i.e., demonstrates improvement even if production increases)
6.	Whether your goal is absolute or normalized, you need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only).
Wh	TION E PUBLIC OUTREACH AND PERFORMANCE REPORTING y do we need this information? M needs to know how environmental Describe how the facility has shared and plans to share environmental information.
	ase briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to provide the activities that your facility conducted during this reported to interact with the community on environmental issues and to provide the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to provide the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to provide the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to provide the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to provide the activities that your facility conducted during this report.
mar	ase indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as by as appropriate.
	Web site (http://www) ☐ Open house ☐ Meetings ☐ Press releases ☐ Community advisory panel
1 1 4	Other

ADDITIONAL INFORMATION

Why do we need this information?
This information will help IDEM to effectively manage the

What do you need to do?
Answer the questions as completely as possible.

This information will help IDEM to effectively manage the Environmental Stewardship Program.

In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months.

- Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.
- 3. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?

CERTIFICATION AND PLEDGE

On behalf of (name of facility)

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature

Title SIL D

Date (month, day, year)

Printed signature Temen

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: <u>esp@idem.IN.gov</u> (Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here. SECTION D **ENVIRONMENTAL IMPROVEMENT INITIATIVES**

Fac	ities need to show they are committed to liter environmental performance. What do you need to do? Identify your facility's next environmental improvement initiative. Refer to the Environmental Performance Table and answer the following questions.
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2.	Does this initiative address a significant aspect in your EMS?
	⊠ Yes
	No—please explain why you believe this indicator should be included as an environmental improvement initiative: ———————————————————————————————————
3.	Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?
-	Yes—please explain how your initiative exceeds regulatory requirements:
	X No
tu	pp! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and in to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below.
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	Other

consider.

2.

ADDITIONAL INFORMATION

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What do you need to do? Answer the questions as completely as possible.

This information will help IDEM to effectively manage the Environmental Stewardship Program.

In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should

If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration? **CERTIFICATION AND PLEDGE** On behalf of (name of facility) I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance. Easton, Auburn We, ______, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years. I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report. Signature Date (month, day, year) Manager 20 Printed signat

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov

In the to	y use - non-tra table below, pla by fuel type. Pla city generator, cally combusted	ease enter the amount of energy the ease note that you need only compount only need to complete the ease only need to complete the	entry you currently use and that you in plete those lines that are relevant to e first line. If the facility uses natura " section). After completing the tall	ntend to use in your future reportin by your facility. If all of your energy is I gas, please be sure to complete t	s purchased from a local the appropriate line (natural gas
	Reduce h	ur energy use commitment to: azardous waste Improve wa gy of each type does your facility u	_	ombination of both strategies	
4D. H	ow mach ener	gy of each type does your facility to	Baseline year	Future year	Units
			2009_	20_10_	
	Energy	Electricity			
	Generated	Steam			
	Off-Site	Total energy generated off-site			
		Coal			
		Natural gas			
		Crude oil			
		Fuel oil			
	l .	Diesel			
		Propane / LPG			
	1	Gasoline			
	l	Hydrogen powered fuel cells			
	Sources of	Natural gas / methane powered	fuel		
	Energy	cells			
	Generated	Biomass			
	On-Site	Solar			
	1	Wind			
		Landfill gas			
		Geothermal			
		Hydroelectric			
	1	Tire derived fuel			
		Other fuel or source			
		Specify:			
	l	Total energy generated on-site			
	Total renew	able energy use	,		
		enewable energy use			
	Total energy	y use			
		of CO2 equivalents			
	Metric tons	of CO2 equivalents			
		through purchases of electricity			
		enewable off-site sources			
	Net metric t	ons of CO2 equivalents			
In the you m produc	table below, pl anage currentl ct packaging.	y and that you intend to manage in	of non-hazardous waste, broken do n your future reporting year. "Waste to question 4 and complete the remainent to:	" is defined as all materials sent of	. Please enter both the amounts f-site that are neither product nor
	Reduce h		ste management methods	ombination of both strategies	
The I		thod of waste managed	Baseline year	Future year	Units
			20	20	
	Landfill				
	Incineration				
		cycled off-site			
		agement - specify:			
		hazardous waste			
	. otal mon-				

That of your nazarabas waste to name	ed using each management method?		
Method of waste managed	Baseline year 20	Future year 20	Units
_andfill			
ncineration			
Reused/recycled off-site			
reated on-site			
Other management			
specify:			
Total hazardous waste			
ions - Total greenhouse gases		by process and source. Please e	enter both the amounts

Source		Baseline year 20_	Future year 20	Units
	Stationary combustion			
	Mobile sources			
	Refrigeration/AC equipment use			
	Process/Fugitive			
Direct	Specify source:			
Emissions	Process/Fugitive			
	Specify source:			
	Process/Fugitive			
	Specify source:			
	Total direct emissions Process/Fugitive			
	Purchased electricity			
Indirect	Purchased steam			
Emissions	Purchased hot water			
	Total indirect emissions			
	Other			
	Specify source:			
Optional	Other			
Indirect	Specify source:			
Emissions	Other			
	Specify source:			
	Total optional indirect emissions			
	Offsets			
	Specify source:			
	Offsets			
Offsets	Specify source:			
	Offsets			
	Specify source: Total reductions from offsets			
	Total emissions less offsets			
	Total CFC			
	Total HCFC			
Supplemental	Total stationary combustion – biomass			
Information	Total mobile sources – biomass CO2			
	Electricity trading transactions- electricity			
	purchase for resale			

	-		ENTERNAMENTAL PERFORMAN	ICE DATA				
APPEN	IDIX 1 use - non-tra	neportation	ENVIRONMENTAL PERFORMAN	ICE DATA				
n the ta down b electrical s typical	able below, ple y fuel type. Ple ity generator, y ally combusted	ease enter the amount of energy the ease note that you need only comp you may only need to complete the	at you currently use and that you in lete those lines that are relevant to first line. If the facility uses natural " section). After completing the tab	your facility. If all of your energy is gas, please be sure to complete to	s purchased from a local he appropriate line (natural ga			
questio	ns.							
[Reduce h			mbination of both strategies				
4b. Ho	ow much energy of each type does your facility use?							
٦			Baseline year 20	Future year 20	Units			
ŀ	Energy	Electricity	20					
- 1	Generated	Steam						
- 1	Off-Site	Total energy generated off-site						
ı		Coal						
- 1		Natural gas						
- 1		Crude oil						
- 1		Fuel oil						
		Diesel						
- 1		Propane / LPG						
- 1		Gasoline						
- 1		Hydrogen powered fuel cells						
- 1	Sources of	Natural gas / methane powered f	uel					
- 1	Energy	cells						
- 1	Generated	Biomass						
- 1	On-Site	Solar						
- 1		Wind						
		Landfill gas Geothermal			-			
- 1		Hydroelectric						
- 1		Tire derived fuel						
- 1		Other fuel or source						
- 1		Specify:						
- 1		Total energy generated on-site		- 0				
ı	Total renewable energy use							
ı		newable energy use						
- 1	Total energy							
- 1		of CO2 equivalents						
- 1		of CO2 equivalents						
- [Offset t	hrough purchases of electricity						
- 1		enewable off-site sources						
	Net metric to	ons of CO2 equivalents						
aste	able below, pl	y and that you intend to manage in	f non-hazardous waste, broken dow your future reporting year. "Waste" question 4 and complete the rema	is defined as all materials sent of	Please enter both the amount- f-site that are neither product			
u ma oduc	the goal of yo	ur non-hazardous waste commitme		mbination of both strategies				
ou ma oduc a. Is	the goal of you Reduce how much of you	ur non-hazardous waste commitme azardous waste	ste management methods	mbination of both strategies				
ou ma roduc a. Is	the goal of you Reduce how much of you	ur non-hazardous waste commitme azardous waste	ste management methods	Future year	Units			
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ste - Hazardous wa	este generation				
ne table below, pleas manage currently a	se enter your facility's amou and that you intend to manag	e in your future report	ing year. Include all ha	e management method. Plea zardous waste that is treated	
ipleting the table, re	turn to question 4 and comp	lete the remaining app	dication questions.		
	hazardous waste commitme ardous waste	ent to: waste management r	nethods	ation of both strategies	
How much of your	hazardous waste is handled	l using each managen	nent method?		
Method of wa	ste managed	Baselin 20	e year	Future year	Units
Landfill					
Incineration					
Reused/recycl	led off-site				
Treated on-sit					
Other manage					
	ecify:				
Total hazardo	ous waste				
ne table below, plea nage currently and t				cess and source. Please ent	
ne table below, plea nage currently and ti lication questions. Is the goal of your Reduce ene	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases corrgy use Reduce proce	your future reporting your mitment to: ess-related emissions	ear. After completing Combination of b	the table, return to question 4	
ne table below, plea nage currently and ti lication questions. Is the goal of your Reduce ene	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases co	your future reporting your mitment to: ess-related emissions	ear. After completing Combination of b	the table, return to question 4	
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ne table below, plea nage currently and ti lication questions. Is the goal of your Reduce ene	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases corgy use Reduce procesouse gas does your facility e	your future reporting your mitment to: ess-related emissions	Combination of b	the table, return to question 4 oth strategies Future year	and complete the remaining
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te table below, plea tage currently and the tage currently and the transfer of the tage of	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases correctly use Reduce procestouse gas does your facility expected Refrigeration/AC equipment Process/Fugitive Specify source: Process/Fugitive Specify source: Process/Fugitive Process/Fugitive Process/Fugitive Process/Fugitive	your future reporting your future reporting your future reporting your mittens to: ess-related emissions emit from each source	Combination of b	the table, return to question 4 oth strategies Future year	and complete the remaining
e table below, plea age currently and tication questions. Is the goal of your Reduce energy Reduce energy Reduce Direct	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases correctly use Reduce procestouse gas does your facility expected as a composition of the facility of the fac	your future reporting your future reporting your future reporting your future reporting your future research to: emit from each source ent use	Combination of b	the table, return to question 4 oth strategies Future year	and complete the remaining
te table below, plea tage currently and the tage currently and the transfer of the tage of	se enter your facility's amou hat you intend to manage in Total Greenhouse Gases correctly use Reduce procestouse gas does your facility expected Refrigeration/AC equipment Process/Fugitive Specify source: Process/Fugitive Specify source: Process/Fugitive Process/Fugitive Process/Fugitive Process/Fugitive	your future reporting your future reporting your future reporting your future reporting your future research to: emit from each source ent use	Combination of b	the table, return to question 4 oth strategies Future year	and complete the remaining

Source		Baseline year 20	Future year 20	Units
	Stationary combustion			
	Mobile sources			
	Refrigeration/AC equipment use			
	Process/Fugitive			
Direct	Specify source:			
Emissions	Process/Fugitive			
	Specify source:			
	Process/Fugitive			
	Specify source:			
	Total direct emissions Process/Fugitive			
	Purchased electricity			
Indirect	Purchased steam			
Emissions	Purchased hot water			
	Total indirect emissions			
	Other			
	Specify source:			
Optional	Other			
Indirect	Specify source:			
Emissions	Other			
	Specify source:			
	Total optional indirect emissions			
	Offsets			
	Specify source:			
	Offsets			
Offsets	Specify source:			
Olisets	Offsets			
	Specify source:			
	Total reductions from offsets			
	Total emissions less offsets			
	Total CFC			
	Total HCFC			
	Total stationary combustion – biomass			
Supplemental	CO2			
Information	Total mobile sources – biomass CO2			
	Electricity trading transactions- electricity purchase for resale			



INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R / 11-09)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management

Office of Pollution Prevention and Technical Assistance 100 North Senate Avenue MC 64-00, Room IGCS W041

Indianapolis, IN 46204-2251 Telephone: (800) 988-7901 FAX: (317) 233-5627 E-mail: esp@idem.IN.gov www.IN.gov/idem/4132.htm

INSTRUCTIONS: Please use this annual report form if you are a member of the Indiana Environmental Stewardship Program (ESP). Your annual performance report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, FAX, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP program manager at 1-800-988-7901.

The Indiana ESP annual performance report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. Your annual performance report should cover the previous twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit this annual performance report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A FACILITY INFORMATION
Name of facility Eaton Corporation
Name of parent company (If applicable)
Object address (assets a seed at teach)
Street address (number and street)
City/State/ZIP code Auburn, IN 46706
Facility/Company Web site
(UU)W. eaton. COM CONTACT INFORMATION
Contact name (Mr) / Mrs. / Ms. / Dr.)
Title Bridge
EHS Manager.
Telephone number 260 570 - 7918
FAX number
E-mail address
brentjensen@ eaton & com
Mailing address (if different from facility address)
City / State / ZIP Code
REPORTING PERIOD
Reporting period dates (month, day, year)
1a. Is this the third Annual Performance Report of your membership term?
Yes—If yes, answer question 1b. No—If no, skip to the "Change in Information" section of this report.
1b. Do you wish to renew your Indiana Environmental Stewardship Program membership?
Yes—If yes, please complete all sections of this annual report. \[\sum No—If no, please complete all sections of this annual report except for Section D.
No—if no, please complete all sections of this annual report except for Section D.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities?
☐ Yes No
If yes, please describe them:
15.

IDEM needs in	eed this information formation on the perf Management System	? ormance and assessment of y		EMENT SYSTEM	Please sum	marize your fac	What do you need to do? cility's EMS assessments. s if more space is needed.	
1. Is your fa	cility currently register	red to a recognized third-party	EMS standard	?				
conducte Type Sco	d by an independent to e (e.g., ISO 14001 ce	EMS audit or other assessmer hird party at your facility? tification)		your facility? Scope	e of the audit		S audit last conducted at	
2. When did your facility last conduct an internal or corporate environmental compliance audit? Do not include inspections or site visits by regulatory organizations. Scope of the audit Month(s) / Year(s) Dec 2009 Who conducted the audit(s) (e.g., facility staff, corporate, third party)								
		other audits that were condu-		cility.				
4. Has your assessm	facility corrected all in ents?	nstances of potential environmize corrective actions taken a	nental non-com	pliance and EMS	non-conformance ide		our audits and other stances identified.	
complian	nents made as a resu ce audit(s).	utrics oil Ha	or		these instances.			
	ste water	V						
effective'	What changes, if ar	rienced within the facility duringly, have been made to your fa	cility's emerger	ncy or contingend	y plans?	contingency pl	ans detailed in the EMS	
Man	th (Vens Alm)	agement review of your EMS 2009 Name and title Breut		1 EHS	Mensger.			
7. When did	your facility last cond	duct a systematic identification 2009 - EHS And	or review of v	our environmenta				
Performa	nce Initiative in Section	rrative summary of progress r on C. You may limit the sumn Attach additional sheets as ne	nary to environ	MS objectives an mental aspects th	d targets <u>other than th</u> at are <i>significant</i> and	nose reported a towards which	s an Environmental progress has been made	
Environmenta	aspect	Progress ma	de this year (e.	g., quantitative o	r qualitative improvem	nents, activities	conducted)	
Facilities need improvement	eed this information I to share the results on Initiative that was pure	? of the environmental sued during the reporting perio		EMENT INITIAT S identifi	ummarize your facility	's progress on	What do you need to do? achieving the initiative you noual Performance Report.	
Category To	tal water consi	Baseline Quantity		oal Quantity	Current Quan		Cost Savings	
Calendar year	is.	2008	2	900	2009	1	10% deenmi.	
Actual quantit	y (per year)	26,136,646	19,60	2,485	23466	000.	I'm water	
	uantity (per year)	137565			1235	.05	10% deenase 1'n water consumption.	
	normalizing factor of paint produced)	The last	to de	Vanhours	Worked.	(oct sowings	
Measuremen	Measurement unit (e.g. pounds)							

Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress.

Please list any state, U.S. EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).

Measurement unit (e.g., pounds)

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION D

ENVIRONMENTAL IMPROVEMENT INITIATIVES

What do you need to do?

Why do we need this information?

	ilities need to show they are committed to Identify your facility's next environmental improvement initiative. Refer to the Environmental Performance Table and answer the following questions.
1a.	What category have you selected from the Environmental Performance Table? Engage Use
1b.	What indicator have you selected from the Environmental Performance Table? Total (non-transportation) everyy we
1c.	All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?
	All Specific
	If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). Notward gos consumption will be reduced by 10% with the installability of two new arr rotations with a decomposition of older air make up with.
1d.	What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)?
2.	Does this initiative address a significant aspect in your EMS? Yes
	No—please explain why you believe this indicator should be included as an environmental improvement initiative: GHG Reduction
3.	Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?
	Yes—please explain how your initiative exceeds regulatory requirements:
tur	op! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and not appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below. What units are you using to quantify this indicator? List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year. Baseline quantity
SEC	CTION E PUBLIC OUTREACH AND PERFORMANCE REPORTING
IDE	y do we need this information? M needs to know how environmental Describe how the facility has shared and rmation was shared with the public. What do you need to do? Describe how the facility has shared and plans to share environmental information.
	ase briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to put publicly on its environmental performance.
mar	ase indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as ny as appropriate. Neb site (http://www) Open house Meetings Press releases Community advisory panel
	Other

ADDITIONAL INFORMATION

Why do we need this information?

What do you need to do?

Answer the questions as completely as possible. This information will help IDEM to effectively manage the Environmental Stewardship Program. In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months. PSO grove Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration? **CERTIFICATION AND PLEDGE** On behalf of (name of facility) I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance. Stewardship Program every three years. I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report. Date (month, day, year) Signature Printed signatur Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to: **IDEM-OPPTA** ESP Program Manager MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov (Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION D

ENVIRONMENTAL IMPROVEMENT INITIATIVES

	lities need to show they are committed to lities need to show they are committed to	
1a.	What agreemy have you calcated from the Environmental Performance Table? 5400 start 1100	
1b.	What indicator have you selected from the Environmental Performance Table? Total (hon-tran sportation) everyy we	
1c.	All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?	
	□ All	
	Specific	
•	If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced specific waste component).	
1d.	What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)?	
2.	Does this initiative address a significant aspect in your EMS?	
	X Yes	
	No—please explain why you believe this indicator should be included as an environmental improvement initiative: ———————————————————————————————————	
	Great while god consumption 1-20 action.	
3.	Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?	
	Yes—please explain how your initiative exceeds regulatory requirements:	
	W	
	No No	
Stop! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and turn to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, retuto this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below.		
4a.	What units are you using to quantify this indicator?	
4b.	List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year.	
	Baseline quantity Year	
	Future year quantity (not including production) Year	
5.	Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal?	
	Normalized goal (i.e., indexed to level of business in baseline year)	
	Absolute goal (i.e., demonstrates improvement even if production increases)	
6.	Whether your goal is absolute or normalized, you need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only).	
SEC	TION E PUBLIC OUTREACH AND PERFORMANCE REPORTING	
IDE	y do we need this information? Meds to know how environmental mation was shared with the public. What do you need to do? Describe how the facility has shared and plans to share environmental information.	
Plea	ise briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to publicly on its environmental performance. Colculated TRT but did wit exceed any exportable quantities.	
Please indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check a		
mar	y as appropriate.	
	Veb site (http://www) ☐ Open house Meetings ☐ Press releases ☐ Community advisory panel	
\Box	Other	

ADDITIONAL INFORMATION

Why do we need this information?

What do you need to do? Answer the questions as completely as possible.

This information will help IDEM to effectively manage the Environmental Stewardship Program. In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months. 2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration? CERTIFICATION AND PLEDGE DOVO On behalf of (name of facility) I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance. ton, Auburn , commit to maintaining the principles and goals outlined in our Environmental Management System We. for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years. I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report. Signature Title day, year) EHS Manager (month. Printed signat Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

> **IDEM-OPPTA** ESP Program Manager MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov